PART B - FEE(S) TRANSMITTAL

Complete and send his form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

JUN 1 8 2007

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

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27498

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03/15/2007

PILLSBURY WINTHROP SHAW PITTMAN LLP P.O. BOX 10500 MCLEÁN, VA 22102 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mina Oliveri	(Depositor's name
Minoli	(Signature)
6/15/07	(Date)

			<u> </u>	1h~ 91	<u>ن</u>	(Signature)
				6/15/07		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/847,963	05/02/2001	•	Jason Seung-Min Kim	00 (4.0.400)	2100653.991380	7268
TITLE OF INVENTION: GENERAL PURPOSE INPUT/ OUTPUT CONTROLLER				06/18/20	07 NNGUYEN2 60000057 5	504160 09847963
				01 FC:15 02 FC:80 03 FC:15	91	1460.00 OP 30.00 OP
. APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	06/15/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
HSU, A	ALPUS	2616	370-419000			
1. Change of corresponde CFR 1.363).	ence address or indication	n of "Fee Address" (37	2. For printing on the p		4	
CFR 1.303). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		(1) the names of up to or agents OR, alternative	vely,			
			(2) the name of a single	e firm (having as a	member a 2	
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(2) the name of a single registered attorney or a 2 registered patent atto- listed, no name will be	meys or agents. If n printed.	o name is 3		
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print or type	oe)		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIG			(B) RESIDENCE: (CITY			
Nvidia (Corporation		Santa Cla	ra, CA		
Please check the appropriate assignce category or categories (will not be printed on the patent):						
4a. The following fee(s)	are submitted:	4t	o. Payment of Fee(s): (Plea	se first reapply any	y previously paid issue fee:	shown above)
Issue Fee			XXA check is enclosed.		•••	,
Publication Fee (No small entity discount permitted)		Payment by credit card. Form PTO-2038 is attached.				
Advance Order -	# of Copies10		The Director is hereby overpayment, to Depo	authorized to charg sit Account Number	te the required fee(s), any de 50-416 (enclose a	ficiency, or credit any n extra copy of this form).
5. Change in Entity Status (from status indicated above)						
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.						
Authorized Signature		1. j.		Date	-	
Typed or printed name	e Anthony	C. Murabito	<u> </u>	Registration No	o. <u>35, 295</u>	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No.: NVID-P003091

I hereby certify that this transmittal of the below described document is being deposited with the United States Postal Service in an envelope bearing First Class Postage and addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the below date of deposit.

Date of 6/15/07 Name of F

Deposit:

Name of Person Making the Deposit: Mina Oliveri

Signature of the Person

Making the Deposit:

Inventor(s):

Jason Seung-Min Kim

Serial No.:

09/847,963

Group Art Unit:

2616

Filed:

5/02/2001

Examiner:

Hsu, Alpus

Confirmation No:

7268

Title:

GENERAL PURPOSE INPUT/OUTPUT CONTROLLER

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450 ATTENTION: Mail Stop Issue Fee

Sir:

TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 CFR 1.311)

1. Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85

2. X Applicant is other than a small entity

Fee Calculation

(for other than a small entity)					
Application Status is:	Regular	<u>Design</u>	Total		
Fee (CFR 1.18(a) and (b)):	X \$1,400.00	\$800.00	1,400.00		
Additional Copies (10 @ \$3.00	30.00				
Publication Fee			300.00		
Total Fees			1,730.00		

PAYMENT OF FEES

- 1. The full fee due in connection with this communication is provided as follows:
- [X] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 50-4160.
 A <u>duplicate copy</u> of this authorization is enclosed.
- [X] A check in the amount of \$1,730.00
- [X] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 50-4160.

Please direct all correspondence concerning the above-identified application to the following address:

MURABITO, HAO & BARNES LLP Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060

Respectfully submitted,

Date:	By:
	Anthony C. Murabito
	Reg. No.: 35,295